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Please type a plus sign (+) inside this box [+]

UTILITY PATENT APPLICATION TRANSMITTAL

Atty. Docket No.

GP100-03.CN1

Total

[48]

First Named Inventor or Application Identifier

ADAMS et al.

"DECOY PROBES"

(Only for new non-provisional applications under 37 CFR 1.53(b))

Express Mail Label No.

ET620464619US


☒ Continuation ☐ Divisional ☐ Continuation-In-Part (CIP) of prior application No.: 09/365,121

The entire disclosure of the prior application, from which an oath or declaration is supplied under is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

PAPERS BEING SUBMITTED	DESCRIPTION/COMMENTS	Total Pages
1. <input checked="" type="checkbox"/> FEE TRANSMITTAL SHEET (IN DUPLICATE)	*See Claims fee statement below.	2
2. <input checked="" type="checkbox"/> SPECIFICATION <input checked="" type="checkbox"/> TRUE COPY OF PRIOR SPECIFICATION	App. Cover Page (1 pg.); Description (33 pgs.); Claims (6 pgs.); and Abstract (1 pg.)	[40]
3. <input checked="" type="checkbox"/> FORMAL DRAWINGS	5 Figures	[6]
3. <input checked="" type="checkbox"/> FORMAL DRAWINGS TRANSMITTAL SHEET		1
4. <input checked="" type="checkbox"/> DECLARATION /POA <input checked="" type="checkbox"/> TRUE COPY OF PRIOR DECLARATION		[2]
5. <input checked="" type="checkbox"/> INFORMATION DISCLOSURE STATEMENT		2
6. <input checked="" type="checkbox"/> PTO FORM 1449 (2 PGS. IN DUPLICATE)		4
7. <input checked="" type="checkbox"/> PRELIMINARY AMENDMENT		5
8. <input checked="" type="checkbox"/> MARKED UP COPY OF AMENDMENTS		3
9. <input checked="" type="checkbox"/> CHECK (\$710.00 - FILING FEE)		--
10. <input checked="" type="checkbox"/> STATEMENT UNDER 37 C.F.R. §§ 1.821(e) & (f)		2
11. <input checked="" type="checkbox"/> RETURN/PRE-PAID POSTCARD		--
PAPERS RELATING TO THIS FILING BUT NOT SUBMITTED HERewith	(IN PRIOR APPLICATION)	
<input checked="" type="checkbox"/> ASSIGNMENT - (RECORDED 10/19/98 - Reel 09508 Frame 0827)	Provisional App. No. 60/094,979	---
<input checked="" type="checkbox"/> PREVIOUSLY CITED REFERENCES (PTO Forms 1449 & 892)	Prior App. S.N. 09/365,121	---

☒ *CLAIMS FEE CALCULATION BASED UPON PRELIMINARY AMENDMENT FILED HEREWITH.

☒ **Charge Statement:** The Commissioner for Patents is hereby authorized to charge any further amounts due, or credit any overpayments, in connection with the filing or prosecution of this application to Deposit Account No. 07-0835.

CORRESPONDENCE ADDRESS	
<input checked="" type="checkbox"/> CUSTOMER NUMBER OR BAR CODE LABEL	 021365 PATENT AND TRADEMARK OFFICE

Certificate of Mailing

I hereby certify that the enclosed application papers comprise a true copy of prior application Serial No. 09/365,121, filed July 30, 1999, and is being deposited on the date indicated below with the U.S. Postal Service as Express Mail No. ET620464619/US addressed to Box Patent Application, Commissioner for Patents, Washington, D.C. 20231

Date: May 29, 2001By: Charles B. Cappellari, Registration No. 40,937

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

**FEE TRANSMITTAL
for FY 2001**

Patent fees are subject to annual revision.

Complete if Known

Application Number	To Be Assigned (Prior App. No. 09/365,121)
Filing Date	May 29, 2001
First Named Inventor	ADAMS <i>et al.</i>
Group Art Unit	To Be Assigned (Prior: Group Art Unit 1655)
Examiner Name	To Be Assigned (Prior: Chakrabarti, A)
Attorney Docket No.	GP100-03.CN1

TOTAL AMOUNT OF PAYMENT (\$ 710.00)

METHOD OF PAYMENT (check one)

1. ☒ The Commissioner is hereby authorized to debit further fees or credit any overpayments to:

Deposit Account No. 07-0835

Deposit Account Name Gen-Probe Incorporated

☒ Charge any additional fee required under 37 CFR 1.16 and 1.172. ☒ Payment Enclosed: ☒ Check

FEE CALCULATION

1. BASIC FILING FEE

Large Fee Code	Entity Fee (\$)	Filing Fee Description	Fee Paid
101	710	Utility	710.00
106	320	Design	
114	150	Provisional	
108	710	Reissue	
SUBTOTAL (1)			\$ 710.00

2. EXTRA CLAIM FEES

	Extra Claims	Fee From Below	Fee Paid
Total Claims	20 -20 0	18	0.00
Ind. Claims	02 -3 03	80	0.00
Multiple, Dependent			
Large Fee Code	Entity Fee (\$)	Fee Description	
103	18	Claims in excess of 20	
102	80	Independent claims in excess of 3	
104	270	Multiple dependent claim, if not paid	
109	80	**Reissue independent claims over original patent	
110	18	**Reissue claims in excess of 20 and over original patent	
SUBTOTAL (2)			\$ 0.00

FEE CALCULATION (continued)

3. ADDITIONAL FEES

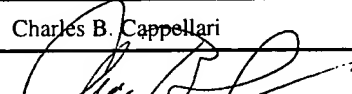
Fee Code	Large Entity Fee (\$)	Description	Fee Paid
105	130	Surcharge - late filing fee or oath.....	
127	50	Surcharge - late provisional filing fee or cover sheet.....	
139	130	Non-English specification	
147	2,520	Filing a request of <i>ex parte</i> reexamination	
112	920*	Requesting publication of SIR prior to Examiner action...	
113	1,840*	Requesting publication of SIR after Examiner action.....	
115	110	Extension for reply within first month	
116	390	Extension for reply within second month	
117	890	Extension for reply within third month	
118	1,390	Extension for reply within fourth month	
128	1,890	Extension for reply within fifth month	
119	310	Notice of Appeal	
120	310	Filing a brief in support of an appeal	
121	270	Request for oral hearing	
138	1,510	Petition to institute a public use proceeding	
140	110	Petition to revive - unavoidable	
141	1,240	Petition to revive - unintentional	
142	1,240	Utility issue fee (or reissue).....	
143	440	Design issue fee.....	
144	600	Plant issue fee.....	
122	130	Petitions to the Commissioner	
123	130	Petitions related to provisional applications.....	
126	180	Submission of Information Disclosure Statement.....	
581	40	Recording each patent assignment per property (Times number of properties / ____ applicants).....	
146	710	Submission after final rejection (37 CFR § 1.129(a)).....	
149	710	Each add'l invention to be examined (37 CFR § 1.129(b))...	
179	710	Request for Continued Examination (RCE).....	
169	900	Request for expedited examination - design application..	
Other fee (specify) _____			

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) \$

SUBMITTED BY

Complete (if applicable)

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Signature		Date	May 29, 2001		